

Centre Statement of Student Support

(For Blended Learning students only)



Student ID:
(If Known)

Student name:

MOE Number:

Centre details

Centre name:

Name of centre owner:

Centre street address:

Centre postal address:
(If different from above)

Centre phone:

Centre email:

Centre opening hours:

Associate Teacher

An Associate Teacher is required to have a minimum Diploma of Teaching (ECE) or equivalent qualification and hold full New Zealand teacher registration. An Associate Teacher is a person in an early childhood centre who provides support and guidance for students during the minimum 16 hours per week (paid or voluntary) in their home centre and during the students home centre field practice. The Associate teacher is expected to be located at the same location as the student.

Name of Associate Teacher:

email address:

Qualification of Associate Teacher:

Please attach a copy of your qualification to this form, unless a copy has been previously forwarded to New Zealand Tertiary College.

Education Council registration number:

Education Council practising certificate expiry date:

Associate Teacher signature:

Date:

Please note: Associate Teachers are required to complete a New Zealand Tertiary College Associate Teacher Application Form. If you have not previously submitted an Associate Teacher Application Form, please complete the form and return along with this form.

Declaration

- I accept the Education Council of Aotearoa New Zealand requirements that while students may be counted as part of the teacher: child ratio during their home centre field practice placement **this does not apply** when participating in triadic discussions with the Visiting Lecturer and the Associate Teacher
- I have read the New Zealand Tertiary College prospectus and understand the study requirements of the students chosen program and mode of study at New Zealand Tertiary College
- I am prepared to assist the student to complete their study requirements in this centre. I am prepared to enable the student to attend any required classes, field practice and distance learning block course as outlined in the prospectus for the students chosen mode of study

Signature of Centre owner:

Date:

Wait! Before returning this form, please check that you have:

- Read the New Zealand Tertiary College website (www.nztertiarycollege.ac.nz)
- Completed all sections of the form
- Attached a copy of the Associate Teachers qualifications (Minimum qualification of Diploma of Teaching (ECE))
- Completed the Associate Teacher Application Form (if not previously submitted by the nominated Associated Teacher)
- Signed and dated this form

Should you have any queries, please phone New Zealand Tertiary College on +64 9 520 4000

If you are an NZTC Applicant then please return via: **Scan and email: enrolments@nztertiarycollege.ac.nz**
Fax: 09 520 4020

If you are an current NZTC student then please return via: **Scan and email: fieldpractice@nztertiarycollege.ac.nz**

or post to: **Auckland Campus**

New Zealand Tertiary College
 PO Box 17143
 Greenlane, Auckland 1546

Christchurch Campus

New Zealand Tertiary College
 PO Box 5561
 Papanui, Christchurch 8542

New Zealand Tertiary College office use only:

- Centre approval
- Centre eMail address
- Associate Teacher qualification received
- Associate Teacher Application received
- Associate Teacher registration number verified online (<http://www.educationcouncil.org.nz/search-the-register>)
- Associate Teacher registration number, status and expiry date entered

Name of staff member:

Date: